

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number: 3235-0076

Expires: May 31, 2002

Estimated average burden hours

per response..

FORM D

NOTICE OF SALE OF SECURITIES 2 5 2002 PURSUANT TO REGULATION 6

SEC USE ONLY

DATE DECEIVE

OMB APPROVAL

SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION 5

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Private Placement Filing Under (Check box(es) that apply): Rule 504 ☐ Rule 505 □ Rule 506 ☐ ULOE Type of Filing: New Filing A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the Issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Tots the World, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 28442 Via Alfonse, Laguna Niguel, California 92677 Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 28442 Via Alfonse, Laguna Niguel, California 92677 714.435.9862 Brief Description of Business Type of Business Organization other (please specify): corporation limited partnership, already formed business trust MAY 1 0 2002 limited partnership, to be formed Month Year [ ] Estimated Actual or Estimated Date of Incorporation or Organization: [1][2][0][1] [X] Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE CN for Canada; FN for other foreign jurisdiction) [][] GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

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# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director for corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Owner Officer Managing Partner  Full Name (Last name first, if individual)  Heather Jacques  Business or Residence Address (Number and Street, City, State, Zip Code)  28442 Via Alfonse, Laguna Niguel, California 92677  Check Box(es) that Apply: Promoter Beneficial Executive Director General and/or Owner Officer Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)	Check Box(es) that Apply:	□ Promoter	⊠ Beneficial		Director	☐ General and/or
Heather Jacques  Business or Residence Address (Number and Street, City, State, Zip Code)  28442 Via Alfonse, Laguna Niguel, California 92677  Check Box(es) that Apply: Promoter Beneficial Executive Director General and/or Owner Officer Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)			Owner	Officer		Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)  28442 Via Alfonse, Laguna Niguel, California 92677  Check Box(es) that Apply: Promoter Beneficial Executive Director Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)	Full Name (Last name first, if individual)		,			
28442 Via Alfonse, Laguna Niguel, California 92677  Check Box(es) that Apply: Promoter Beneficial Executive Director Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: Promoter Beneficial Executive Director Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)	,					
Owner Officer Managing Partner Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>					
Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)	Check Box(es) that Apply:	☐ Promoter	-		☐ Director	
Business or Residence Address (Number and Street, City, State, Zip Code)	E II N		Owner	Officer_		Managing Partner
	run Maine (Last name mist, if individual)					
	Business or Residence Address (Number and St	reet, City, State, Zin Code)				
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Owner Officer Managing Partner	Check Box(es) that Apply.	Tromoter		_	_ Director	
Full Name (Last name first, if individual)	Full Name (Last name first, if individual)		O W MOI	Officer	<del> </del>	7740744 77474
Business or Residence Address (Number and Street, City, State, Zip Code)	Business or Residence Address (Number and St	reet, City, State, Zip Code)				
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Owner Officer Managing Partner			Owner	Officer		Managing Partner
Full Name (Last name first, if individual)	Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)	Business or Residence Address (Number and St	reet, City, State, Zip Code)				
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Owner Officer Managing Partner  Full Name (Last name first, if individual)	Full Name (Last name first: if individual)		Owner	Officer		Managing Partner
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Owner Officer Managing Partner	check box(es) that ripply.	_ riomoter			_ Director	
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Business or Residence Address (Number and Street, City, State, Zip Code)	Business or Residence Address (Number and St	reet, City, State, Zip Code)				
Check Box(es) that Apply:	Check Box(es) that Apply:	Promoter	☐ Beneficial	Executive	Director	General and/or
Owner Officer Managing Partner		<del></del>	Owner	Officer		Managing Partner
Full Name (Last name first, if individual)	Full Name (Last name first, if individual)					- <del></del>
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Business or Residence Address (Number and Street, City, State, Zip Code)	business of Residence Address (Number and St	icet, City, State, Zip Code)			•	
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				В. І	NFORMA	TION AB	OUT OFF	ERING				
	the issuer sering?							ors in	Yes	No		
	Ans	wer also i	n Appendi	x, Column	2, if filing	g under Ul	LOE.					
2. What	is the min	imum inve	estment th	at will be a	accepted fr	om any in	dividual? .	•••••	\$0.03	<b>X</b> T.		
3. Does	the offerin	ng permit j	joint owne	rship of a	single uni	:?			Yes ⊠	No		
4. Enter	r the infor	mation re	quested fo	or each pe	rson who	has been	or will be	paid or				
given, d	lirectly or i	indirectly,	any comi	nission or	similar re	muneratio	n for solici	itation of				
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	ociated Broker or											
	ch Person Listed I							_				
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name first, if it	ndividual)						<del></del>				
Business or R	esidence Address	(Number and St	reet, City, State,	Zip Code)						<u> </u>		
Name of Asso	ociated Broker or	Dealer										
Committee William	- Down - Lined I	In Caliniand on I	Colleia	Db								
	ch Person Listed F "All States"							1	] All St	atec		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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Full Name (La	ast name first, if ir	ndividual)										
Business or R	esidence Address	(Number and Str	reet, City, State,	Zip Code)					<u></u>			<del></del>
Name of Asso	ciated Broker or I	Dealer			<u></u>							
States in Whic	ch Person Listed H	las Solicited or I	ntends to Solicit	Purchasers								
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Sold Already
Debt	\$ 0.00	\$ 0.00
Equity	\$ 60,000.00	\$ 29,500.00
[X] Common [ ] Preferred		
Convertible Securities (including warrants)	\$ 0.00	\$ 0.00
Partnership Interests	\$ 0.00	\$ 0.00
Other (Specify: )	\$ 0.00	\$ 0.00
Total	\$ 60,000.00	\$ 29,500.00

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".

	Number of Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	9	\$ 20,500.00
Non-accredited Investors	3	\$ 9,500.00
Total (for filings under Rule 504 only)		\$

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$

4.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees		\$ 200.00
Printing and Engraving Costs		\$ 100.00
Legal Fees	$\boxtimes$	\$ 450.00
Accounting Fees		\$ 250.00
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		\$
Total		\$1,000.00

4.b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$59,000,00		
455,000.00	 	 

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above. Salaries and fees \$ \$ Purchase of Real Estate \$ Purchase, rental or leasing and installation of machinery and equipment \$ \$ Construction or leasing of plant buildings and facilities \$ \$ Acquisition of other businesses (including the value of securities involved in \$ this offering that may be used in exchange for the assets or securities of \$ another issuer pursuant to a merger Repayment of indebtedness \$ Working Capital M \$59,000.00 \$ Other Expenses (identify) \$ \$ Column Totals \$ Total Payments Listed (column totals added) \$59,000.00 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print Name) Signature Date April 12, 2002 Tots the World, Inc. Name of Signer (Print or Type) Heather Jacques Heather Jacques President ATTENTION

# ATTENTION Intentional misstatements or omissions of fact constitute federal criminal violations.(See 18 U.S.C. 1001)

# E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes \(\subseteq\) No \(\subseteq\)

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.

4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print Name)	Signature	Date
	Heather Jacques	
Tots the World, Inc.	0 ()	April 1 2, 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
	Heather Jacques	
Heather Jacques	President	
Treatmen vacques	1100,001	

#### Instruction:

Print the rame and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

ADDENDIV

			***************************************	APPE	NDIX		<u></u>		
, ,		2	3			4			
1	Intend to accredited	sell to non- investors in t B-Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)	Type of inve	stor and amount p	State UL attach ex waiver	cation under OE (if yes, planation of granted) E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA	X		Common: \$60,000.00	9	\$20,500.00	3	\$9,000.00		X
CO									
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1		2	3			4		1	5 ication under OE (if yes,
	State (Part	investors in B-Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
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MO									
MT							1		
NE									
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Last update: 08/27/1999